

YES	NO	10. Questionnaire (Place an "X" in the proper column)
X		a. Is this the official copy of the series? If not, where is it?
	X	b. Does the series contain confidential information requiring security handling? If yes, cite law or regulation.
	X	c. Is this a vital record?
X		d. Does this series have historical or long term research value?
	X	e. When one or two documents in the file make it necessary to keep the entire file for a long period, could these documents be scheduled separately?
	X	f. Is the information contained in this series ever published? If yes, attach copy.
	X	g. Is the information contained in this series ever analyzed and/or recorded in a summarized report? If yes, attach copy.
	X	h. Is there a duplication of this series in your office, or in another office or agency? If yes, where?
	X	i. Is this series (or a major portion of it) regularly microfilmed?
	X	j. Does the record series result in a computer printout?

11. Retention Requirements

The following requires the series to be kept:

a. State Law	<u>3</u> years.	d. Audit period	<u>3</u> years.
b. Statute of limitation	<u>-</u> years.	e. Administrative need	<u>5</u> years.
c. Federal law	<u>3</u> years.	f. Federal retention instructions	<u>5</u> years.

Attach copy or excerpt of laws or regulations. Explain administrative need.

Copy attached - Medicaid State Plan

12. Approved Disposition Instructions

This agency recommends that the file series be cut off at the end of each:

☒ Calendar Year; ☐ Fiscal Year; ☐ Other _____ then,

- ☒ Hold in the current files area _____ month(s) 2 year(s); then
- ☐ Transfer to local holding area, hold _____ year(s); then
- ☒ Transfer to State Records Center; hold 3 year(s); then
- ☒ Destroy.
- ☐ Transfer to State Archives for permanent retention.
- ☐ Other (Specify)

These instructions apply to all prior and future accumulations of the series.

Agency Head/Designee (Signature)	Date	Records Management Officer (Signature)	Date
<i>Jap M. Cury</i>	3-11-80	<i>Paul T. Murphy</i>	3-11-80
Recommendations in paragraph 12 are approved. (If disapproved, attach letter of explanation.)		State Records Committee (Signature)	
		<i>[Signature]</i>	3-19-80
		Secretary of State/Designee <i>Carroll Hart</i>	3-18-80
		Attorney General/Designee <i>MT Hall</i>	3-19-80